REPORT ON FINAL EXAMINATION FOR THE Ph.D. DEGREE

Please complete the student section and give this form to your Doctoral Committee. Submit this form along with your dissertation to the Graduate Division, Kolligian Library, Room 227.

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<th>LAST NAME</th>
<th>FIRST NAME</th>
<th>MIDDLE NAME</th>
<th>STUDENT ID#</th>
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<th>MAJOR</th>
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Name of Degree: Ph.D. in ______________________________________________________________________________

Title of Dissertation: ______________________________________________________________________________

Language Requirement (if applicable) ____________ Date Passed _______________

DOCTORAL COMMITTEE

It is the responsibility of the committee to make an evaluation of the student’s overall performance. Please complete this section and have the student file this form with the Graduate Division.

Date of Dissertation Defense: __________________________

DECISION: Please indicate the Committee’s decision (check one): □ Favorable □ Unfavorable

□ Favorable pending the following change(s):

____________________________________________________________________________________

If the vote of the Committee is Unfavorable, please explain:

____________________________________________________________________________________________________________

_________________________________________________________________________________________________________________________

LIST NAMES OF ALL COMMITTEE MEMBERS:

Print Name | Academic Unit | Signature | Date
-----------|---------------|-----------|------

Committee Chair

Committee Member

Committee Member

Committee Member

Committee Member (4th member is optional)

SCHOOL

It is the responsibility of the student to obtain the appropriate signatures.

School Approvals:

Graduate Advisor: PRINT __________________ SIGN ______________ Date

Graduate Group Chair: PRINT __________________ SIGN ______________ Date

GRADUATE DIVISION Use Only:

Requirements fulfilled: □ Advanced to Candidacy □ Residency □ Dissertation Approved □ Language (if applicable)

□ Conferred □ Denied Degree Conferred for: □ Fall □ Spring □ Summer Year ____________

Graduate Division Dean Signature: __________________________________________ Date: __________________________